HAND DELIVERED MC

and the appropriate	Each question in this part must be answered and the appropriate	Yes No 🗸	Unity out, gour spouse, or a dependent child have any reportable liability (more V. than \$10,000) during the reporting period?	<
· by many and a	If yes, complete and attach Schedule IX.		if yes, complete and attach Schedule IV.	1
outside Yes   No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Yes 🗸 No	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting period?	7
	If yes, complete and attach Schedule VIII.		If yes, complete and attach Schedule III.	-
ing in the Yes No	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Yes 🗸 No 🗌	Did you, your spouse, or a dependent child receive "unearned" income of III. more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the needed?	=
	If yes, complete and attach Schedule VII.		If yes, complete and attach Schedule II.	
le travel or nan \$335 Yess ☐ No 🕢	Old you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335	Yes No	Did any individual or organization make a donation to charity in lieu of paying il. you for a speech, appearance, or article in the reporting period?	=
	If yes, complete and attach Schedule VI.		If yes, complete and attach Schedule I.	ł
legiftin herwise Yes □ No ☑	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Yes 🕢 No 🗌	Did you or your spouse have "earned" income (e.g., salaries or fass) of \$200 i. or more from any source in the reporting period?	:-
	UESTIONS	OF THESE C	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	<b>-</b>
late.		☐ Termination	Type  Annual (May 15)	
more than 30 days	Termination Date:			Ì
be assessed against	Employee		<i>(</i> )	
A \$200 penalty shall	Employing Office:		Filer Member of the U.S. State: NV	
(Office Use 64lly) s	(Daytime Telephone)		(Full Name)	
	(202) 225-6155 US H		Dean Arthur Heller	
200 MAY 15 AM 11: 44	200			
LATIVE RESOURCE CENTER	For use by Members, officers, and employees ATTVE RESOURCE CENTER	MENT	CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT	_
	FORMA	TATIVES	UNITED STATES HOUSE OF REPRESENTATIVES	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Yes No S

schedule attached for each "Yes" response.

Each question in this part must be answered and the appropriate

Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes

8 5

Ύes 

**8** 

Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on

If yes, complete and attach Schedule V.

Trusts-

## **SCHEDULE I - EARNED INCOME**

Name Dean Arthur Heller

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Туре	Amount
Carson School District	Spouse Salary	\$3,717

# SCHEDULE II - PAYN

AYMENIS MADE TO CHARITY IN LIEU OF HONORARIA	Name Dean Aithui Hellei	Page = 12
ity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct ansmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain opriately labeled.	nt made by the sponsor of an event to a charitable filed directly with the Committee on Standards of ees may request a green envelope from the Clerk	ent to a charitable organization in lieu on Standards of Official Conduct. A see from the Clerk or use a plain
opriately labeled.		

	List the of an green envelopment
Source	List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.
Activity	icle), date, and amount of any payment made es receiving such payments must be filed dire ach Member's filing package. Employees may
Date	by the sponsor of an even ectly with the Committee o request a green envelope
Amount	the sponsor of an event to a charitable organization in lieutly with the Committee on Standards of Official Conduct. A equest a green envelope from the Clerk or use a plain

SP	7	DC	DC	DC	SP	ASSI Identify (a) as a fair market and (b) any o than \$200 in land, provide mutual funds retirement pilin which you investments) in the account plans that are and its value that is not put its activities; information, sinformation, sinformation, sinformation of parent or sible savings account of your so choot that of yours.		SCHEDUL
Brombach Family Ltd Pshp % of , see attached.	Bank of America	Bank of America	Bank of America	Bank of America	AD Clark Family Ltd Pshp % of Rental Property, see attached.	Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or natural funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.  Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK A	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$1,000,001 - \$5,000,000	\$1,001 - \$15,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$250,001 - \$500,000	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "Nome."	вгоск в	Name Dean Arthur Heller
INTEREST	INTEREST	INTEREST	INTEREST	INTEREST	RENT	Type of income Check all columns that apply. For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA". For all other assets including all IRAs, indicate the type of income by checking the appropriate box below. Dividends and Interest, even if reinvested, should be listed as income. Check "None" if asset did not generate any income during the calendar year.	BLOCK C	hur Heller
\$50,001 - \$100,000	\$1 - \$200	\$201 - \$1,000	\$201 - \$1,000	\$201 - \$1,000	NONE	Amount of income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, including all IRAs, indicate the category of income by checking the appropriate box below. Dividends and interest, even if reinvested, should be listed as income. Check "None" If no income was earned or generated.	вгоско	
	-					Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.	BLOCK E	Page 4)12

SCHEDUL	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	K Name Dean Arthur Heller	thur Heller		Page sliz
	Loan to Heller for Congress	\$15,001 - \$50,000	None	NONE	
DC	Mass Mutual Life Ins	\$15,001 - \$50,000	None	NONE	
DC	Mass Mutual Life Ins	\$15,001 - \$50,000	None	NONE	
DC	Mass Mutual Life Ins	\$15,001 - \$50,000	None	NONE	
SP	Mass Mutual Life Ins	\$15,001 - \$50,000	None	NONE	
	Mass Mutual Life Ins	\$50,001 - \$100,000	None	NONE	
	State of Nevada Retirement	\$50,001 - \$100,000	None	NONE	

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### SCHEDULE IV - TRANSACTIONS

Name Dean Arthur Heller

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC,	Asset	Type of Transaction	Date	Amount of Transaction
SP	Brombach Family Ltd Pshp ( See attached)	q	various	\$500,001 - \$1,000,000
Sp	Brombach Family Ltd Pshp ( See attached)	S(part)	various	\$500,001 - \$1,000,000

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. SCHEDULE V - LIABILITIES 7 D \$ 2/2 Creditor Name Dean Arthur Heler Type of Liability **Amount of Liability** Page <u>ក</u>

### SCHEDULE VI - GIFTS

ZI

Name Dear Arthur Heller

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Report the source, a brief description, and the value of all gifts totaling more than \$335 received by you, your spouse, or a dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule. Source Description Value

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

spouse or dependent child that is totally independent of his or her relationship to you. sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, Name Jean Arthur Heller Page 9112

ZP.	Source
	Date(s)
	Point of Departure DestinationPoint of Return
,	Lodging? (Y/N)
	Food? (Y/N)
	Was a Family 9? Food? Member Included? (Y/N) (Y/N)
	Days not at sponsor's expense

representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I. Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, SCHEDULE VIII - POSITIONS Position 乙五 Name Dean Arthur Heller Name of Organization Page 10/12

### **SCHEDULE IX - AGREEMENTS**

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of Name Dean 191thur Heller Page

government sen employee welfan	government service; continuation or deferral of payments by a former or current employer other than the employee welfare or benefit plan maintained by a former employer.	nt employer other than the U.S. Government; or continuing participation in an
Date	Parties To	Terms of Agreement
	ZH	

**FOOTNOTES** Number 乙五 Section / Schedule Name Footnote Dean Arthur Heller This note refers to the following item Page य प्र

### **DEAN HELLER**

### SCHEDULE III ATTACHMENT AD CLARK FAMILY LTD PARTNERSHIP 12/31/2008

### **ADDRESS OF PROPERTY OWNED**

12901 WEST JEFFERSON BLVD LOS ANGELES CALIFORNIA

ESTIMATED VALUE OF PROPERTY \$414,600

RENTAL GROSS INCOME \$0

RENTAL NET INCOME (LOSS) (\$6,207)

<sup>\*</sup>Net results at a loss for 2008 due to the property being vacant.

### SCHEDULE III ATTACHMENT BROMBACH FAMILY LP 12/31/2008

	ASSET VALUE	ESTIMATED INCOME
CMA MONEY FUND/CASH	\$24,626	\$76
ACCRUED INTEREST	\$17,295	· -
MUNI BONDS	, ,	
LOS ANGELES CA UNI SCH	\$107,059	\$5, <del>4</del> 42
MONTERY CNTY CA COP	\$70,062	\$3,455
PUERTO RICO MUN FIN AGY	\$64,556	\$3,420
CALIFORNIA ST ECONOMIC	\$50,489	\$2,419
BAKERSFIELD CA WASTEWTR	\$43,566	\$2,073
LOS ANGELES CO CA CTFS	\$66,738	\$3,265
LOS ANGELES CA MTA SLS	\$53,176	\$2,419
BENICIA CA UNI SCH DIST	\$30,137	<b>\$1</b> ,161
LOS ANGELES CA CMNTY CLG	\$75,468	\$3,455
CALIFORNIA EDL FAC AUTH	\$90,356	\$4,146
SAN FRAN CA CY-CO PUB	\$91,127	\$4,146
CALIFORNIA ST DPT WTR RES PSR SER A OID	\$38,815	\$1,771
SAN FRANCISCO CA CY-CO	\$73,376	\$3,455
CALIFORNIA ST ECONOMIC	\$90,137	\$4,353
SAN JOAQUIN DELTA CCD	\$73,269	\$2,764
ORANGE CNTY CA SANTN	\$49,164	<b>\$2,246</b>
UNIVERSITY CA REVS GEN	\$38,200	\$1,728
BVRLY HLLS CA PUB FN AT	\$60,173	\$2,902
CENTRAL COAST WTR AUTH	\$75,924	\$3,455
SAN DIEGO CA UNI SCH	\$80,942	\$3,455
LOMPOC CA UNI SCH DIST	<b>\$22,472</b>	\$933
SACRAMENTO CA MUN UTIL	\$37,758	\$1,728
SAN DIEGO CO CA WTR AT	\$92,735	<b>\$4</b> ,146
MONTEREY PENINSULA CA	\$43,201	\$1,866
SANFRANCISCO CA CMNTY	\$80,583	\$3,939
SAN MATEO CA UN HIGH SCH	\$69,400	\$3,455
	\$1,710,804	\$77,673

### SCHEDULE IV ATTACHMENT BROMBACH FAMILY LP 12/31/2008

### **PROCEEDS**

RIVERSIDE CO CA TROOM	6/2/2008	\$34,550
SAN JOSE CA REDEV AGY	8/1/2008	\$31,786
SAN JOSE CA REDEV AGY	8/1/2008	\$71,864
CABRILLO CA UNI SCH DIST	8/1/2008	<b>\$4</b> 1,460
CLOVIS CA UNISCH DIST	11/3/2008	\$69,100
SANTA ANA CA CMNTY REDEV	7/7/2008	\$56,440
LOS ANGELES CA MTA SLS	7/1/2008	\$103,650
BELL CA CMNTY HSG AUTH	4/16/2008	\$22,511
CALIFORNIA ST FSA-CR	10/8/2008	\$57,828
RICHMOND CA WASTEWTR REV	7/7/2008	\$64,326
OAKLAND CA UNI SCH DIST	7/7/2008	<b>\$42,5</b> 11
CALIF ST DPT WTR RES PSR PUT AMBAC	1/30/2008	\$34,550
LIVERMORE AMADOR VY WTR	7/7/2008	\$42,034
EAST BAY CA MUD WTR SYS	12/3/2009	\$51,825
PUERTO ORICO COMWLTH	7/1/2008	\$69,100

	TOTAL		\$793,535
PURCHASES	DATE PUCHASED	ASSET VALUE	ESTIMATED INCOME
MONTERY PENINSULA CA	1/24/2008	\$44,539	\$1,866
LOMPOC CA UNI SCH DIST	5/13/2008	\$22,287	\$933
SACRAMENTO CA MUN UTIL	6/13/2008	\$37,998	\$1,728
SAN FRAN CA CY-CO PUB	7/16/2008	\$89,423	\$4,146
CALIFORNIA ST DPT WTR	7/29/2008	\$37,653	<b>\$1,77</b> 1
BENICA CA UNI SCH DIST	2/7/2008	\$30,625	<b>\$1,</b> 161
CALIFORNIA EDL FACS AUTH	7/31/2008	\$89,086	\$4,146
SAN DIEGO CO CA WTR AT	8/22/2008	<b>\$92</b> ,036	\$4,146
LOS ANGELES CA CMNTY CLG	8/21/2008	<b>\$74</b> ,540	\$3,455
LOS ANGELES CA MTA SLS	9/4/2008	\$52,610	\$2,419
SAN DIEGO CA UNI SCH	9/18/2008	<b>\$76,04</b> 1	\$3,455
PUERTO RICO MUN FIN AGY	11/6/2008	\$64,669	\$3,420
LOS ANGELES CO CA CTFS	12/9/2008	\$66,390	3265
CALIFORNIA ST ECONOMIC	12/12/2008	\$50,221	2419
	TOTAL	\$828,118	\$35,911